



Supplemental Application Data Sheet

**Application Information**

Application number:: 10/091,182  
Filing Date:: March 5, 2002  
Application Type:: Regular  
Subject Matter:: Utility  
Title:: REAL TIME HIGH ACCURACY  
GEOSPATIAL DATABASE FOR ONBOARD  
INTELLIGENT VEHICLE  
Attorney Docket Number:: U11.12-0145  
Request for Non-Publication?::  
Suggested Drawing Figure::  
Total Drawing Sheets::  
Small Entity?:: Yes  
Petition included?::  
Petition Type::

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Given Name:: Max  
Family Name:: Donath  
Name Suffix::  
City of Residence:: St. Louis Park  
State or Province of Residence:: MN  
Country of Residence:: US  
Street of Mailing address:: 4200 Sunset Blvd. St.  
City of Mailing address:: St. Louis Park  
State of Province of mailing address:: MN  
Country of mailing address:: US  
Postal or Zip Code:: 55416  
Applicant Authority Type:: Inventor

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Primary Citizenship Country:: US  
Given Name:: Bryan  
Family Name:: Newstrom  
Name Suffix::  
City of Residence:: BlaineCircle Pines  
State or Province of Residence:: MN  
Country of Residence:: US  
Street of Mailing address:: ~~11496 Meadow Lane~~605 Village  
Parkway  
City of Mailing address:: BlaineCircle Pines  
State of Province of mailing address:: MN  
Country of mailing address:: US  
Postal or Zip Code:: ~~55449~~55014

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Given Name:: Craig R.  
Family Name:: Shankwitz  
Name Suffix::  
City of Residence:: Minneapolis  
State or Province of Residence:: MN  
Country of Residence:: US  
Street of Mailing address:: 3113 Humboldt Avenue South  
City of Mailing address:: Minneapolis  
State of Province of mailing address:: MN  
Country of mailing address::  
Postal or Zip Code:: 55408

Applicant Authority Type:: Inventor  
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Primary Citizenship Country:: US  
Given Name:: Alec  
Family Name:: Gorjestani  
Name Suffix::  
City of Residence:: Minneapolis  
State or Province of Residence:: MN  
Country of Residence:: US  
Street of Mailing address:: 5530 - 44<sup>th</sup> Avenue South  
City of Mailing address:: Minneapolis  
State of Province of mailing address:: MN  
Country of mailing address::  
Postal or Zip Code:: 55417

**Comments:** Repeat the above for each inventor

#### **Correspondence Information**

Name:: **Brian D. Kaul**  
Street of mailing address:: Westman, Champlin & Kelly  
900 Second Avenue South, Suite 1600  
City of mailing address:: Minneapolis  
State or Province of mailing address:: MN  
Postal or Zip Code of mailing address:: 55402-3319  
Phone number:: 612/334-3222  
Fax number:: 612/334-3212  
E-Mail address:: **bkaul@wck.com**

**Representative Information**

|                                  |       |  |
|----------------------------------|-------|--|
| Representative Customer Number:: | 27367 |  |
|----------------------------------|-------|--|

**Domestic Priority Information**

|                  |                   |                      |                      |
|------------------|-------------------|----------------------|----------------------|
| Application::    | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
| This application |                   |                      | MM/DD/YY             |
|                  |                   |                      |                      |
|                  |                   |                      |                      |

**Foreign Priority Information**

|           |                      |               |                    |
|-----------|----------------------|---------------|--------------------|
| Country:: | Application number:: | Filing Date:: | Priority Claimed:: |
|           |                      | MM/DD/YY      | Yes or No          |
|           |                      |               |                    |
|           |                      |               |                    |

**Assignee Information**

Assignee name:: University of Minnesota  
Street of mailing address:: 450 McNamara Alumni Center,  
200 Oak Street SE  
City of mailing address:: Minneapolis  
State or Province of mailing address:: MN  
Postal or Zip Code of mailing address:: 55455

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